

## Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER <b>Guardian Angels AFH2 LLC /Marie cres P. Guntalilib</b>	LICENSE NUMBER <b>752870</b>
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**NOTE:** The term "the home" refers to the adult family home / provider listed above.

The scope of care, services, and activities listed on this form may not reflect all required care and services the home must provide. The home may not be able to provide services beyond those disclosed on this form, unless the needs can be met through "reasonable accommodations." The home may also need to reduce the level of care they are able to provide based on the needs of the residents already in the home. For more information on reasonable accommodations and the regulations for adult family homes, see Chapter 388-76 of Washington Administrative Code.

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### About the Home

**1. PROVIDERS STATEMENT (OPTIONAL)**

The optional provider's statement is free text description of the mission, values, and/or other distinct attributes of the home.

**Our mission...Guardian Angels AFH2 LLC is to make positive differences in every life we touch. We are caring and loving home- like environment which focuses on promoting physical, social, safety and individual rights. Our goal is to provide supervision, supportive services needed to regain and maintain highest functioning level and enhancement their quality of life.**

**2. INITIAL LICENSING DATE**

**05/07/2015**

**3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:**

**1325 Lebanon Street SE Lacey, WA 98503**

**4. SAME ADDRESS PREVIOUSLY LICENSED AS:**

*N/A*

**5. OWNERSHIP**

- ☐ Sole proprietor  
☒ Limited Liability Corporation  
☐ Co-owned by:  
☐ Other:

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## Personal Care

"Personal care services" means both physical assistance and/or prompting and supervising the performance of direct personal care tasks as determined by the resident's needs, and does not include assistance with tasks performed by a licensed health professional. (WAC 388-76-10000)

### 1. EATING

If needed, the home may provide assistance with eating as follows:

**We provide home cooked nutritious meals and assistance with eating, cutting foods and proper tools**

### 2. TOILETING

If needed, the home may provide assistance with toileting as follows:

**Provide monitoring and cueing with toileting...commode, urinals and bedpan if needed. We assist transferring on and off toilet, changing pads and make orders for incontinence supplies.**

### 3. WALKING

If needed, the home may provide assistance with walking as follows:

**We provide assistance with walking, walking assistance with gait belts and wheelchair assistance inside and outdoor areas.**

### 4. TRANSFERRING

If needed, the home may provide assistance with transferring as follows:

**We provide necessary assistance with all transferring needs, sliding boards, lifting belts and use hoier lift if needed.**

### 5. POSITIONING

If needed, the home may provide assistance with positioning as follows:

**We provide necessary assistance in positioning and repositioning every 2 hours to maintain skin integrity**

### 6. PERSONAL HYGIENE

If needed, the home may provide assistance with personal hygiene as follows:

**We provide assistance to clients according to their own preferences or ability like brushing teeth, wash and rinse teeth, clean dentures, combing, and set podiatrist to trim toe nails if needed.**

### 7. DRESSING

If needed, the home may provide assistance with dressing as follows:

**We provide assistance with dressing. We respect and promote client independency in selecting their own clothes.**

### 8. BATHING

If needed, the home may provide assistance with bathing as follows:

**We assist clients, set up and provide shower chair.**

### 9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

**We do have walk in shower for safety purposes.**

## Medication Services

If the home admits residents who need medication assistance or medication administration services by a legally authorized person, the home must have systems in place to ensure the services provided meet the medication needs of each resident and meet all laws and rules relating to medications. (WAC 388-76-10430)

The type and amount of medication assistance provided by the home is:

**We follow physicians order, pharmacy oversight using bubble packs and bottles.**

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ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

**Medication are delivered through a LTC pharmacy. Provider order refills and obtain doctors order**

**Skilled Nursing Services and Nurse Delegation**

If the home identifies that a resident has a need for nursing care and the home is not able to provide the care per chapter 18.79 RCW, the home must contract with a nurse currently licensed in the state of Washington to provide the nursing care and service, or hire or contract with a nurse to provide nurse delegation. (WAC 388-76-10405)

The home provides the following skilled nursing services:

**Nurse deligation like tube feeding, medication administration, urinary catheter care.**

The home has the ability to provide the following skilled nursing services by delegation:

**Blood glucose monitoring, inhalation medication, Topicals, insulin administration.**

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

**We have registered nurse who will provide oversight medical practices**

**Specialty Care Designations**

We have completed DSHS approved training for the following specialty care designations:

- ☒ Developmental disabilities
- ☒ Mental illness
- ☒ Dementia

ADDITIONAL COMMENTS REGARDING SPECIALTY CARE DESIGNATIONS

**Manager mental health , manager dementia, certified experienced CNA, special focus on diabeties, fundamentals of caregiving.**

**Staffing**

The home's provider or entity representative must live in the home, or employ or have a contract with a resident manager who lives in the home and is responsible for the care and services of each resident at all times. The provider, entity representative, or resident manager is exempt from the requirement to live in the home if the home has 24-hour staffing coverage and a staff person who can make needed decisions is always present in the home. (WAC 388-76-10040)

- ☐ The provider lives in the home.
- ☐ A resident manager lives in the home and is responsible for the care and services of each resident at all times.
- ☒ The provider, entity representative, or resident manager does not live in the home but the home has 24-hour staffing coverage, and a staff person who can make needed decisions is always present in the home.

The normal staffing levels for the home are:

- ☒ Registered nurse, days and times: **Only as needed**
- ☐ Licensed practical nurse, days and times: \_\_\_\_\_
- ☒ Certified nursing assistant or long term care workers, days and times: **24 hours 7 days**
- ☒ Awake staff at night
- ☒ Other: **Caregiver with certifications and training, NAC, full experienced staff.**

ADDITIONAL COMMENTS REGARDING STAFFING

**We have 24 hrs awake staff professionally trained and competent staff**

**Cultural or Language Access**

The home must serve meals that accommodate cultural and ethnic backgrounds (388-76-10415) and provide informational materials in a language understood by residents and prospective residents (Chapter 388-76 various sections)

The home is particularly focused on residents with the following background and/or languages:

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**Any nationality (with family member who can communicate effectively in english)**

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

**We accommodate cultural barrier**

**Medicaid**

The home must fully disclose the home's policy on accepting Medicaid payments. The policy must clearly state the circumstances under which the home provides care for Medicaid eligible residents and for residents who become eligible for Medicaid after admission. (WAC 388-76-10522)

- ☐ The home is a private pay facility and does not accept Medicaid payments.
- ☒ The home will accept Medicaid payments under the following conditions:

ADDITIONAL COMMENTS REGARDING MEDICAID

**Activities**

The home must provide each resident with a list of activities customarily available in the home or arranged for by the home (WAC 388-76-10530).

The home provides the following:

**Holiday celebrations (Christmas ,New Year and Thanksgiving) birthday,ice cream, pop corn night, board games, cards, movie night, gardening, pet therapy and professional in home visit from hair stylist (cut only)**

ADDITIONAL COMMENTS REGARDING ACTIVITIES

**Activities choosen in accordance to each residence capabilities and interest whenever possible**

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